## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Scot Kevin HUBER et al.

Application No.: 10/612,269

Filed: July 3, 2003

For: CONTROL OF ARTHROPODS IN

**ANIMALS** 

Group Art Unit: 1626

Examiner: Kamal A. Saeed

Confirmation No.: 4089

## REPLY AND AMENDMENT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In complete response to the Official Action mailed March 15, 2004, please amend the subject application as follows:

04/15/2004 YPOLITE1 00000005 10612269

01 FC:1202 02 FC:1201 504.00 OP 86.00 OP



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Application No.: 10/612,269

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Title: CONTROL OF ARTHROPODS

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Commissioner for Patents

Alexandria, VA 22313-1450

■ Applicant(s) previously submitted

enclosed.

BURNS DOANE SWECKER & MATHIS LLP INTELLECTUAL PROPERTY LAW

for which continued examination is requested.

P.O. Box 1450

Group Art Unit: 1626

Examiner: Kamal A. Saeed

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## AMENDMENT/REPLY TRANSMITTAL LETTER

Sir: Enclosed is a reply for the above-identified patent application. A Petition for Extension of Time is also enclosed. Terminal Disclaimer(s) and the \$\infty\$ \$55.00 (2814) \$\infty\$ \$110.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed. Also enclosed is/are \_\_\_\_\_ Small entity status is hereby claimed. Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the □ \$385.00 (2801) □ \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e). Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.

AMENDMENT/REPLY TRANSMITTAL LETTER BURNS DOANE

Applicant(s) requests suspension of action by the Office until at least

§ 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R.

A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also

	Νo	additional	claim	fee	is	required
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X A	An additional	claim fee is	s required.	and is	calculated as	s shown below.
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		A	MEN	DE	CLAIMS		
	No. of Claims	Highes of Cla Previo	aims ously		Extra Claims	Rate	Additional Fee
Total Claims	48	MINUS	20 =	=	28	x \$18.00 (1202) =	\$ 504.00
Independent Claims	4	MINUS	3 =	=	1	x \$86.00 (1201) =	\$ 86.00
If Amendment adds n	nultiple depen	dent claim	ıs, add	\$29	90.00 (1203)		
Total Claim Amendment Fee					\$ 590.00		
☐ Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee					\$ 0.00		
TOTAL ADDITIONAL CLAIM FEE DUE FOR THIS AMENDMENT					\$ 590.00		

X	A check in the amount of	of \$590.00	is enclosed for the fee due.
	Charge	to Deposit Accou	unt No. 02-4800.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: April 14, 2004

Registration No. 26,254